

County: Marathon
 COLONIAL MANOR MEDICAL/REHAB CENTER
 1010 EAST WAUSAU AVENUE

Facility ID: 2290

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WAUSAU 54403 Phone: (715) 842-2028

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/00): 146

Total Licensed Bed Capacity (12/31/00): 152

Number of Residents on 12/31/00: 136

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? Yes

Average Daily Census: 146

Corporation

Skilled

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)		%
-----		-----				-----		-----
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	38.2	
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years	38.2	
Supp. Home Care-Household Services	No	Developmental Disabilities	1.5	Under 65	9.6	More Than 4 Years	23.5	
Day Services	No	Mental Illness (Org./Psy)	8.8	65 - 74	7.4		-----	
Respite Care	No	Mental Illness (Other)	1.5	75 - 84	29.4		100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	43.4	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	10.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.7		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	13.2		100.0	(12/31/00)		
Other Meals	No	Cardiovascular	17.6	65 & Over	90.4	-----		
Transportation	No	Cerebrovascular	11.8	-----	-----	RNs	14.1	
Referral Service	No	Diabetes	5.1	Sex	%	LPNs	3.7	
Other Services	Yes	Respiratory	7.4	-----	-----	Nursing Assistants		
Provide Day Programming for		Other Medical Conditions	32.4	Male	27.9	Aides & Orderlies		
Mentally Ill	No		-----	Female	72.1			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Managed Care			Percent Of All Residents
Level of Care	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	Total No.	
Int. Skilled Care	2	11.8	\$263.02	1	1.1	\$108.44	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	3	2.2%
Skilled Care	15	88.2	\$263.02	88	95.7	\$92.41	0	0.0	\$0.00	27	100.0	\$136.00	0	0.0	\$0.00	130	95.6%
Intermediate	---	---	---	2	2.2	\$76.38	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	2	1.5%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	1	1.1	\$137.83	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	1	0.7%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	17	100.0		92	100.0		0	0.0		27	100.0		0	0.0		136	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
				% Needing Assistance of	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%	One Or Two Staff		
Private Home/No Home Health	10.3	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.0	Bathing	1.5	70.6	27.9	136
Other Nursing Homes	3.4	Dressing	21.3	66.2	12.5	136
Acute Care Hospitals	85.1	Transferring	25.0	59.6	15.4	136
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	22.8	52.2	25.0	136
Rehabilitation Hospitals	0.0	Eating	73.5	19.9	6.6	136
Other Locations	1.1	*****				
Total Number of Admissions	174	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter		7.4	Receiving Respiratory Care	10.3
Private Home/No Home Health	47.2	Occ/Freq. Incontinent of Bladder		57.4	Receiving Tracheostomy Care	0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel		38.2	Receiving Suctioning	0.7
Other Nursing Homes	2.2				Receiving Ostomy Care	8.8
Acute Care Hospitals	22.5	Mobility			Receiving Tube Feeding	6.6
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained		1.5	Receiving Mechanically Altered Diets	31.6
Rehabilitation Hospitals	0.0					
Other Locations	6.2	Skin Care			Other Resident Characteristics	
Deaths	21.9	With Pressure Sores		0.0	Have Advance Directives	100.0
Total Number of Discharges		With Rashes		2.2	Medications	
(Including Deaths)	178				Receiving Psychoactive Drugs	48.5

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	Ownership:			Bed Size:		Licensure:		All	
	Proprietary			100- 199		Skilled		Facilities	
	This Facility %	Peer Group %	Ratio	Peer Group %	Ratio	Peer Group %	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.1	82.5	1.16	83.6	1.15	84.1	1.14	84.5	1.14
Current Residents from In-County	93.4	83.3	1.12	86.1	1.08	83.5	1.12	77.5	1.21
Admissions from In-County, Still Residing	27.0	19.9	1.36	22.5	1.20	22.9	1.18	21.5	1.26
Admissions/Average Daily Census	119.2	170.1	0.70	144.6	0.82	134.3	0.89	124.3	0.96
Discharges/Average Daily Census	121.9	170.7	0.71	146.1	0.83	135.6	0.90	126.1	0.97
Discharges To Private Residence/Average Daily Census	57.5	70.8	0.81	56.1	1.03	53.6	1.07	49.9	1.15
Residents Receiving Skilled Care	97.8	91.2	1.07	91.5	1.07	90.1	1.09	83.3	1.17
Residents Aged 65 and Older	90.4	93.7	0.96	92.9	0.97	92.7	0.98	87.7	1.03
Title 19 (Medicaid) Funded Residents	67.6	62.6	1.08	63.9	1.06	63.5	1.06	69.0	0.98
Private Pay Funded Residents	19.9	24.4	0.81	24.5	0.81	27.0	0.74	22.6	0.88
Developmentally Disabled Residents	1.5	0.8	1.91	0.8	1.79	1.3	1.17	7.6	0.19
Mentally Ill Residents	10.3	30.6	0.34	36.0	0.29	37.3	0.28	33.3	0.31
General Medical Service Residents	32.4	19.9	1.63	21.1	1.53	19.2	1.68	18.4	1.76
Impaired ADL (Mean)	44.6	48.6	0.92	50.5	0.88	49.7	0.90	49.4	0.90
Psychological Problems	48.5	47.2	1.03	49.4	0.98	50.7	0.96	50.1	0.97
Nursing Care Required (Mean)	7.5	6.2	1.22	6.2	1.22	6.4	1.17	7.2	1.05